Feds praise Kentucky's progress with KHIE; hundreds of providers gather at eHealth Summit in Northern Kentucky

Kentucky has much reason to be pleased with its progress in converting its health records from paper to electronic form.

During the fifth annual eHealth Summit in Erlanger, KY, on Sept. 6-7, leaders in business, technology, health care, academia, and government gathered to discuss rapid changes in health information technology. Kentucky has been one of the first states to embrace these changes.

Kentucky was the first state in the nation to issue federal Medicaid Electronic Health Record incentive payments to a hospital for adopting health information technology. Kentucky developed its system for administering the incentives in-house and even gave its code away to other states in a show of good will, said Jessica Kahn, Technical Director for Health IT within the federal Centers for Medicare & Medicaid Services.

A week prior to the summit, Kentucky was awarded the 2011 Public Health and Medicaid Award for Collaboration in Health IT for its efforts. The honor, presented by the Centers for Medicaid and Medicare Services, was announced at the Public Health Informatics Conference in Atlanta.

"Kentucky is in many ways a model," Dr. Farzad Mostashari told the summit crowd. Mostashari, National Coordinator for Health IT with the U.S. Department of Health and Human Services, praised Kentucky's leaders in the Governor's Office of Electronic Health Information and the Kentucky Cabinet for Health and Family Services not just for doing it first, but for doing it right. Kentucky's coordination, as well as the wide array of options it offers providers, is "just smart," Mostashari said.

As of August 31, 266 hospitals, physicians, labs, and other providers have signed on to the state-led system for sharing electronic health records (Kentucky Health Information Exchange or KHIE), which will also assist them in qualifying for 'meaningful use' and federal incentive money.

Electronic health records – shared by qualified health providers while maintaining strict standards for patient privacy – offer a long list of advantages over old-fashioned paper records:
- Eliminates guesswork or reliance on patients' memories of previous treatment
- Encourages more accurate diagnosis and treatment
- Reduces medical errors, such as drug interaction
- Reduces prescription fraud

- Eases collection of aggregate data to better track disease outbreaks or other trends
- Improves overall patient outcomes
- Reduces duplication
- Lowers healthcare costs for all

The annual eHealth Summit began in 2007 as a way for physicians, nurses, support staff, and others to better understand the transition to electronic health records, to network with other health care professionals, and to collaborate with colleagues on outstanding issues. This year's summit attracted more than 340 attendees and more than 30 exhibitors who specialize in health IT and related fields.

The 2011 summit, held at the Northern Kentucky University METS Center, included sessions and workshops on the differences between Medicaid and Medicare incentives; how providers can achieve "meaningful use" of electronic health records – i.e., using them to achieve significant improvements in care; HIPAA & HITECH changes affecting patient privacy, and more. Anton Gunn, Regional Director of the U.S. Department of Health and Human Services, spoke about the impact the Affordable Care Act (President Obama's health care reform) will have on Americans and small business.

In his address to the group, Mostashari advised healthcare providers to become more patient-centered, using patients as a resource to drive cultural change that improves health and lowers costs. He said his office is beginning a campaign to help consumers understand the benefits of electronic health records.

"We're live and operational across the commonwealth," Polly Mullins-Bentley, Deputy Executive Director of the Governor's Office of Electronic Health Information, told those gathered in Erlanger. Dr. Carol Steltenkamp, Chief Medical Information Officer for University of Kentucky HealthCare, said the new system is part of an industry-wide transition to more value-based care.

A panel of four Kentucky physicians – Dr. David Jaco, of Murray; Dr. Phillip Bernard, of Lexington; Dr. Stephen Besson, of Cynthiana; and Dr. Brandon Smallwood, of Pikeville – told of their experiences utilizing the Kentucky Health Information Exchange. The sheer volume of data within KHIE can seem overwhelming at first, but having access to this comprehensive patient information has been very helpful to their practices, to their patients' health, and to the cost of providing care. Smallwood said that using KHIE recently had allowed him to avoid ordering a duplicative MRI for a patient with back pain.

One of the practitioners attending the summit's sessions was Dr. Jaya Pampati, a rheumatologist and the medical director of the Mountain After Hours Clinic in Hazard, Ky. Her clinic, which includes a pediatrician, an internist, and two nurse practitioners, implemented electronic health records four years ago.

Startup costs were $40,000 to $50,000, including software, work stations, and staff training, but the results are well worth it. "There was a little struggle with the change for a while, but within a year, I was able to improve efficiency and see more patients, and that paid for the cost of the system," Pampati said in an interview.

Without a doubt, she said, patient care is better and safer now.   Pampati said, "It's crazy to practice medicine any other way."